

POSITION	INITIALS	ID NO.	DATE
	MA		86/04/07
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			6-13-01
FORMALITY REVIEW	fr	720	08-07-01
RESPONSE FORMALITY REVIEW	fr	30878	11/06/01

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	9/02
2	2/02
3	0/03
4	0/03
5	0/03
6	0/03
7	0/03
8	0/03
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11	0/03
12	0/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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10-9-11  
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